



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved OMB No. 2050-0039 expires 09/30/95

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. 045 F N 050803800008		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address USEPA REGION 5 77 W. JACKSON BLVD CHICAGO, IL 60606 4. Generator's Phone (312) 886-7187						A. State Manifest Document Number CWM 0018323			
5. Transporter 1 Company Name IRAD TRANSPORT INC.						B. State Generator's ID			
6. US EPA ID Number 10K0981588791						C. State Transporter's ID 3405			
7. Transporter 2 Company Name						D. Transporter's Phone 1-800-344-1139			
8. US EPA ID Number						E. State Transporter's ID			
9. Designated Facility Name and Site Address CHEMICAL WASTE MANAGEMENT, INC. Hwy. 73, 3.5 miles W. of Taylor's Bayou Port Arthur, TX 77640						F. Transporter's Phone			
10. US EPA ID Number						G. State Facility's ID 50312			
H. Facility's Phone 409-736-2821									
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	13. Total Quantity	14. Unit Wt. Vol	15. Waste No.				
X	RD, Polychlorinated Biphenyl Mixture, 9 UN315, III	041 DM	EST 27060	K	OUTS3971				
	b.								
	c.								
	d.								
J. Additional Descriptions for Materials Listed Above a. 485506						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information CHEMTREC Emergency Response Number 800.464.9300									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Thomas Cook				Signature [Signature]		Month Day Year 11/01/00			
17. Transporter 1 Acknowledgement of Receipt of Materials						Date			
Printed/Typed Name JOHN R. NICK				Signature [Signature]		Month Day Year 11/01/00			
18. Transporter 2 Acknowledgement of Receipt of Materials						Date			
Printed/Typed Name				Signature		Month Day Year			
19. Discrepancy Indication Space									
EPA Region 5 Records Ctr. 388237 [Barcode]									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest									
Printed/Typed Name				Signature		Month Day Year			

TEXAS NATURAL RESOURCE
CONSERVATION COMMISSION

P.O. Box 13087

Austin, Texas 78711-3087



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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. OH5FNO50803800008		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address USEPA REGION 5 77 W. JACKSON BLVD CHICAGO, IL 60606		4. Generator's Phone (312) 8867180		Jefferson Processors 4243 County Road 714 Mingo Junction OH 43938		A. State Manifest Document Number CWM 0018323			
5. Transporter 1 Company Name TRAXO TRANSPORT INC.		6. US EPA ID Number OKD781589791		C. State Transporter's ID 3405		D. Transporter's Phone 1-800-314-1139			
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address CHEMICAL WASTE MANAGEMENT, INC Hwy. 73, 3.5 miles W of Taylor's Bayou Port Arthur, TX 77640		10. US EPA ID Number		G. State Facility's ID 50212		H. Facility's Phone 4097362831			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
X	a. POLYCHLORINATED BIPHENYL Mixture, 9 UN315, III			0410M		EST 27060	K	OUTS3971	
	b.								
	c.								
	d.								
J. Additional Descriptions for Materials Listed Above a. 485306					K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information CHEMTREC EMERGENCY RESPONSE NUMBER 800.464.9300									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Thomas Cook				Signature <i>[Signature]</i>				Month Day Year 9 0 4 0 0	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date					
Printed/Typed Name JOHN BENICE				Signature <i>[Signature]</i>				Month Day Year 10 0 4 00	
18. Transporter 2 Acknowledgement of Receipt of Materials				Date					
Printed/Typed Name				Signature				Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name				Signature				Month Day Year	